



Reprinted
February 1, 2006

SENATE BILL No. 342

DIGEST OF SB 342 (Updated January 31, 2006 5:15 pm - DI 69)

Citations Affected: IC 25-1; IC 34-30; IC 35-48.

Synopsis: Electronic prescription tracking program. Establishes the scheduled prescription electronic collection and tracking (INSPECT) program within the professional licensing agency. Moves the responsibilities of the controlled substances central repository to the INSPECT program. Provides that the administration of the INSPECT program may be contracted to an outside vendor. Permits the INSPECT program to certify who may receive information from the INSPECT program. Allows the controlled substances advisory committee (committee) to set educational standards for individuals who receive information from the INSPECT program and to identify treatment for individuals addicted to substances monitored by the INSPECT program. Provides that information concerning when certain controlled substances are dispensed is required to be transmitted to the INSPECT program within seven days after the controlled substance is dispensed. Provides immunity from civil liability for a practitioner regarding the use of certain information. Repeals definition of "central repository". Repeals language concerning expenses for the central repository.

Effective: July 1, 2006; July 1, 2007.

Riegsecker

January 10, 2006, read first time and referred to Committee on Corrections, Criminal, and Civil Matters.
January 26, 2006, amended, reported favorably — Do Pass.
January 31, 2006, read second time, amended, ordered engrossed.

SB 342—LS 7099/DI 107+



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February 1, 2006

Second Regular Session 114th General Assembly (2006)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2005 Regular Session of the General Assembly.

SENATE BILL No. 342

A BILL FOR AN ACT to amend the Indiana Code concerning criminal law and procedure.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 25-1-13 IS ADDED TO THE INDIANA CODE AS
2 A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY
3 1, 2006]:
4 **Chapter 13. Indiana Scheduled Prescription Electronic**
5 **Collection and Tracking Program**
6 **Sec. 1. This chapter applies after June 30, 2007.**
7 **Sec. 2. As used in this chapter, "agency" refers to the Indiana**
8 **professional licensing agency established by IC 25-1-5-3.**
9 **Sec. 3. As used in this chapter, "INSPECT" refers to the**
10 **Indiana scheduled prescription electronic collection and tracking**
11 **program established by section 4 of this chapter.**
12 **Sec. 4. The Indiana scheduled prescription electronic collection**
13 **and tracking program is established within the agency.**
14 **Sec. 5. The agency shall perform all administrative functions,**
15 **duties, and responsibilities for the INSPECT program.**
16 **Sec. 6. The INSPECT program shall collect and process**
17 **information received under IC 35-48-7-8.1 and has duties**

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described in IC 35-48-7-10.1 and IC 35-48-7-11.1.

SECTION 2. IC 34-30-2-152.3 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 152.3. IC 35-48-7-11.1(m) (Concerning providing information to or obtaining information from the Indiana scheduled prescription electronic collection and tracking program).**

SECTION 3. IC 35-48-7-5.2 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 5.2. As used in this chapter, "INSPECT" means the Indiana scheduled prescription electronic collection and tracking program established by IC 25-1-13-4.**

SECTION 4. IC 35-48-7-5.4 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 5.4. As used in this chapter, "interoperability" refers to the INSPECT program electronically sharing reported information with another state concerning the dispensing of a controlled substance:**

(1) to a recipient who resides in the other state; or

(2) prescribed by a practitioner whose principal place of business is located in another state.

SECTION 5. IC 35-48-7-5.6 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 5.6. As used in this chapter, "patient" means an individual who has requested or received health care services from a provider for the examination, treatment, diagnosis, or prevention of a physical or mental condition.**

SECTION 6. IC 35-48-7-5.8 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 5.8. As used in this chapter, "practitioner" means a physician, dentist, veterinarian, podiatrist, nurse practitioner, scientific investigator, pharmacist, hospital, or other institution or individual licensed, registered, or otherwise permitted to distribute, dispense, conduct research with respect to, or administer a controlled substance in the course of professional practice or research in the United States.**

SECTION 7. IC 35-48-7-7.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 7.5. As used in this chapter, "state" means any state of the United States or the District of Columbia.**

SECTION 8. IC 35-48-7-8, AS AMENDED BY P.L.204-2005, SECTION 23, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE

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JULY 1, 2006]: Sec. 8. (a) The advisory committee shall provide for a controlled substance prescription monitoring program that includes the following components:

(1) Each time a controlled substance designated by the advisory committee under IC 35-48-2-5 through IC 35-48-2-10 is dispensed, the dispenser shall transmit to the central repository the following information:

(A) The recipient's name.

(B) The recipient's or the recipient representative's identification number or the identification number or phrase designated by the central repository.

(C) The recipient's date of birth.

(D) The national drug code number of the controlled substance dispensed.

(E) The date the controlled substance is dispensed.

(F) The quantity of the controlled substance dispensed.

(G) The number of days of supply dispensed.

(H) The dispenser's United States Drug Enforcement Agency registration number.

(I) The prescriber's United States Drug Enforcement Agency registration number.

(J) An indication as to whether the prescription was transmitted to the pharmacist orally or in writing.

(2) The information required to be transmitted under this section must be transmitted not more than fifteen (15) days after the date on which a controlled substance is dispensed.

(3) A dispenser shall transmit the information required under this section by:

(A) an electronic device compatible with the receiving device of the central repository;

(B) a computer diskette;

(C) a magnetic tape; or

(D) a pharmacy universal claim form;

that meets specifications prescribed by the advisory committee.

(4) The advisory committee may require that prescriptions for controlled substances be written on a one (1) part form that cannot be duplicated. However, the advisory committee may not apply such a requirement to prescriptions filled at a pharmacy with a Type II permit (as described in IC 25-26-13-17) and operated by a hospital licensed under IC 16-21, or prescriptions ordered for and dispensed to bona fide enrolled patients in facilities licensed under IC 16-28. The committee may not require

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multiple copy prescription forms and serially numbered prescription forms for any prescriptions written. The committee may not require different prescription forms for any individual drug or group of drugs. Prescription forms required under this subdivision must be jointly approved by the committee and by the Indiana board of pharmacy established by IC 25-26-13-3.

(5) The costs of the program.

(b) This section expires July 1, 2007.

SECTION 9. IC 35-48-7-8.1 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 8.1. (a) This section applies after June 30, 2007.**

(b) The advisory committee shall provide for a controlled substance prescription monitoring program that includes the following components:

(1) Each time a controlled substance designated by the advisory committee under IC 35-48-2-5 through IC 35-48-2-10 is dispensed, the dispenser shall transmit to the INSPECT program the following information:

(A) The controlled substance recipient's name.

(B) The controlled substance recipient's or the recipient representative's identification number or the identification number or phrase designated by the INSPECT program.

(C) The controlled substance recipient's date of birth.

(D) The national drug code number of the controlled substance dispensed.

(E) The date the controlled substance is dispensed.

(F) The quantity of the controlled substance dispensed.

(G) The number of days of supply dispensed.

(H) The dispenser's United States Drug Enforcement Agency registration number.

(I) The prescriber's United States Drug Enforcement Agency registration number.

(J) An indication as to whether the prescription was transmitted to the pharmacist orally or in writing.

(K) Other data required by the advisory committee.

(2) The information required to be transmitted under this section must be transmitted not more than seven (7) days after the date on which a controlled substance is dispensed.

(3) A dispenser shall transmit the information required under this section by:

(A) uploading to the INSPECT web site;

(B) a computer diskette; or

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(C) a CD-ROM disk;
that meets specifications prescribed by the advisory committee.

(4) The advisory committee may require that prescriptions for controlled substances be written on a one (1) part form that cannot be duplicated. However, the advisory committee may not apply such a requirement to prescriptions filled at a pharmacy with a Type II permit (as described in IC 25-26-13-17) and operated by a hospital licensed under IC 16-21, or prescriptions ordered for and dispensed to bona fide enrolled patients in facilities licensed under IC 16-28. The committee may not require multiple copy prescription forms and serially numbered prescription forms for any prescriptions written. The advisory committee may not require different prescription forms for any individual drug or group of drugs. Prescription forms required under this subdivision must be jointly approved by the committee and by the Indiana board of pharmacy established by IC 25-26-13-3.

(5) The costs of the program.

SECTION 10. IC 35-48-7-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 10. (a) The advisory committee shall designate a central repository for the collection of information transmitted under section 8 of this chapter.

(b) The central repository shall do the following:

(1) Create a data base for information required to be transmitted under section 8 of this chapter in the form required under rules adopted by the advisory committee, including search capability for the following:

(A) A recipient's name.

(B) A recipient's or recipient representative's identification number.

(C) A recipient's date of birth.

(D) The national drug code number of a controlled substance dispensed.

(E) The dates a controlled substance is dispensed.

(F) The quantities of a controlled substance dispensed.

(G) The number of days of supply dispensed.

(H) A dispenser's United States Drug Enforcement Agency registration number.

(I) A prescriber's United States Drug Enforcement Agency registration number.

(J) Whether a prescription was transmitted to the pharmacist

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orally or in writing.

(2) Provide the advisory committee with continuing twenty-four (24) hour a day on-line access to the data base maintained by the central repository.

(3) Secure the information collected by the central repository and the data base maintained by the central repository against access by unauthorized persons.

(4) If the relationship between the advisory committee and the central repository is terminated by statute, provide to the advisory committee, within a reasonable time, all collected information and the data base maintained by the central repository.

(c) The advisory committee may execute a contract with a vendor designated by the advisory committee as the central repository under this section, or the advisory committee may act as the central repository under this chapter.

(d) The central repository may gather prescription data from the Medicaid retrospective drug utilization review program (DUR) established by IC 12-15-35.

(e) The advisory committee may accept and designate grants, public and private financial assistance, and licensure fees to provide funding for the central repository.

(f) This section expires July 1, 2007.

SECTION 11. IC 35-48-7-10.1 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 10.1. (a) This section applies after June 30, 2007.**

(b) The INSPECT program shall do the following:

(1) Create a data base for information required to be transmitted under section 8.1 of this chapter in the form required under rules adopted by the advisory committee, including search capability for the following:

(A) A controlled substance recipient's name.

(B) A controlled substance recipient's or recipient representative's identification number.

(C) A controlled substance recipient's date of birth.

(D) The national drug code number of a controlled substance dispensed.

(E) The dates a controlled substance is dispensed.

(F) The quantities of a controlled substance dispensed.

(G) The number of days of supply dispensed.

(H) A dispenser's United States Drug Enforcement Agency registration number.

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(I) A prescriber's United States Drug Enforcement Agency registration number.

(J) Whether a prescription was transmitted to the pharmacist orally or in writing.

(2) Provide the advisory committee with continuing twenty-four (24) hour a day online access to the data base.

(3) Secure the information collected and the data base maintained against access by unauthorized persons.

(c) The advisory committee may execute a contract with a vendor designated by the advisory committee to perform any function associated with the administration of the INSPECT program.

(d) The INSPECT program may gather prescription data from the Medicaid retrospective drug utilization review (DUR) program established under IC 12-15-35.

(e) The advisory committee may accept and designate grants, public and private financial assistance, and licensure fees to provide funding for the INSPECT program.

SECTION 12. IC 35-48-7-11 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 11. (a) Information received by the central repository under section 8 of this chapter is confidential.

(b) The advisory committee shall carry out a program to protect the confidentiality of the information described in subsection (a). The advisory committee may disclose the information to another person only under subsection (c), (d), or (f).

(c) The advisory committee may disclose confidential information described in subsection (a) to any person who is engaged in receiving, processing, or storing the information.

(d) The advisory committee may release confidential information described in subsection (a) to the following persons:

(1) A member of the board, the committee, or another governing body that licenses practitioners and is engaged in an investigation, an adjudication, or a prosecution of a violation under any state or federal law that involves a controlled substance.

(2) An investigator for the consumer protection division of the office of the attorney general, a prosecuting attorney, the attorney general, a deputy attorney general, or an investigator from the office of the attorney general, who is engaged in:

(A) an investigation;

(B) an adjudication; or

(C) a prosecution;

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of a violation under any state or federal law that involves a controlled substance.

(3) A law enforcement officer who is:

(A) authorized by the state police department to receive information of the type requested;

(B) approved by the advisory committee to receive information of the type requested; and

(C) engaged in the investigation or prosecution of a violation under any state or federal law that involves a controlled substance.

(e) Before the advisory committee releases confidential information under subsection (d), the applicant must demonstrate to the advisory committee that:

(1) the applicant has reason to believe that a violation under any state or federal law that involves a controlled substance has occurred; and

(2) the requested information is reasonably related to the investigation, adjudication, or prosecution of the violation described in subdivision (1).

(f) The advisory committee may release to:

(1) a member of the board, the advisory committee, or another governing body that licenses practitioners;

(2) an investigator for the consumer protection division of the office of the attorney general, a prosecuting attorney, the attorney general, a deputy attorney general, or an investigator from the office of the attorney general; or

(3) a law enforcement officer who is:

(A) authorized by the state police department to receive the type of information released; and

(B) approved by the advisory committee to receive the type of information released;

confidential information generated from computer records that identifies practitioners who are prescribing or dispensing large quantities of a controlled substance.

(g) The information described in subsection (f) may not be released until it has been reviewed by a member of the advisory committee who is licensed in the same profession as the prescribing or dispensing practitioner identified by the data and until that member has certified that further investigation is warranted. However, failure to comply with this subsection does not invalidate the use of any evidence that is otherwise admissible in a proceeding described in subsection (h).

(h) An investigator or a law enforcement officer receiving

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confidential information under subsection (c), (d), or (f) may disclose the information to a law enforcement officer or an attorney for the office of the attorney general for use as evidence in the following:

- (1) A proceeding under IC 16-42-20.
- (2) A proceeding under any state or federal law that involves a controlled substance.
- (3) A criminal proceeding or a proceeding in juvenile court that involves a controlled substance.

(i) The advisory committee may compile statistical reports from the information described in subsection (a). The reports must not include information that identifies any practitioner, ultimate user, or other person administering a controlled substance. Statistical reports compiled under this subsection are public records.

(j) This section expires July 1, 2007.

SECTION 13. IC 35-48-7-11.1 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 11.1. (a) This section applies after June 30, 2007.**

(b) Information received by the INSPECT program under section 8.1 of this chapter is confidential.

(c) The advisory committee shall carry out a program to protect the confidentiality of the information described in subsection (b). The advisory committee may disclose the information to another person only under subsection (d), (e), or (h).

(d) The advisory committee may disclose confidential information described in subsection (b) to any person who is authorized to engage in receiving, processing, or storing the information.

(e) Except as provided in subsections (f) and (g), the advisory committee may release confidential information described in subsection (b) to the following persons:

- (1) A member of the board, the advisory committee, or another governing body that licenses practitioners and is engaged in an investigation, an adjudication, or a prosecution of a violation under any state or federal law that involves a controlled substance.**
- (2) An investigator for the consumer protection division of the office of the attorney general, a prosecuting attorney, the attorney general, a deputy attorney general, or an investigator from the office of the attorney general, who is engaged in:**
 - (A) an investigation;**

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(B) an adjudication; or
 (C) a prosecution;
 of a violation under any state or federal law that involves a
 controlled substance.

(3) An employee of:

(A) a local, state, or federal law enforcement agency; or
 (B) an entity that regulates controlled substances or
 enforces controlled substances rules or laws in another
 state;

that is certified to receive information from the INSPECT
 program.

(4) A practitioner or practitioner's agent certified to receive
 information from the INSPECT program.

(5) A controlled substance monitoring program in another
 state with which Indiana has established an interoperability
 agreement.

(f) Information provided to an individual under:

(1) subsection (e)(3) is limited to information:

(A) concerning an individual or proceeding involving the
 unlawful diversion or misuse of a schedule II, III, IV, or V
 controlled substance; and

(B) that will assist in an investigation or proceeding; and

(C) upon a finding of probable cause and issuance of a
 warrant; and

(2) subsection (e)(4) may only be released for the purpose of:

(A) providing medical or pharmaceutical treatment; or

(B) evaluating the need for medical or pharmaceutical
 treatment to a patient.

(g) Before the advisory committee releases confidential
 information under subsection (e), the applicant must be approved
 by the INSPECT program in a manner prescribed by the advisory
 committee.

(h) The advisory committee may release to:

(1) a member of the board, the advisory committee, or
 another governing body that licenses practitioners;

(2) an investigator for the consumer protection division of the
 office of the attorney general, a prosecuting attorney, the
 attorney general, a deputy attorney general, or an
 investigator from the office of the attorney general; or

(3) a law enforcement officer who is:

(A) authorized by the state police department to receive
 the type of information released; and

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1 (B) approved by the advisory committee to receive the type
 2 of information released;
 3 confidential information generated from computer records that
 4 identifies practitioners who are prescribing or dispensing large
 5 quantities of a controlled substance.

6 (i) The information described in subsection (h) may not be
 7 released until it has been reviewed by:

8 (1) a member of the advisory committee who is licensed in the
 9 same profession as the prescribing or dispensing practitioner
 10 identified by the data; or

11 (2) the advisory committee's designee;

12 and until that member or the designee has certified that further
 13 investigation is warranted. However, failure to comply with this
 14 subsection does not invalidate the use of any evidence that is
 15 otherwise admissible in a proceeding described in subsection (j).

16 (j) An investigator or a law enforcement officer receiving
 17 confidential information under subsection (d), (e), or (h) may
 18 disclose the information to a law enforcement officer or an
 19 attorney for the office of the attorney general for use as evidence
 20 in the following:

21 (1) A proceeding under IC 16-42-20.

22 (2) A proceeding under any state or federal law that involves
 23 a controlled substance.

24 (3) A criminal proceeding or a proceeding in juvenile court
 25 that involves a controlled substance.

26 (k) The advisory committee may compile statistical reports from
 27 the information described in subsection (b). The reports must not
 28 include information that identifies any practitioner, ultimate user,
 29 or other person administering a controlled substance. Statistical
 30 reports compiled under this subsection are public records.

31 (l) This section may not be construed to require a practitioner
 32 to obtain information about a patient from the data base.

33 (m) A practitioner is immune from civil liability for an injury,
 34 death, or loss to a person solely due to a practitioner seeking or not
 35 seeking information from the INSPECT program. The civil
 36 immunity described in this subsection does not extend to a
 37 practitioner if the practitioner receives information directly from
 38 the INSPECT program and then negligently misuses this
 39 information. This subsection does not apply to an act or omission
 40 that is a result of gross negligence or intentional misconduct.

41 (n) The advisory committee may review the records of the
 42 INSPECT program. If the advisory committee determines that a

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1 violation of the law may have occurred, the advisory committee
 2 shall notify the appropriate law enforcement agency or the
 3 relevant government body responsible for the licensure, regulation,
 4 or discipline of practitioners authorized by law to prescribe
 5 controlled substances.

6 SECTION 14. IC 35-48-7-12 IS AMENDED TO READ AS
 7 FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 12. (a) The advisory
 8 committee shall adopt rules under IC 4-22-2 to implement this chapter,
 9 including the following:

10 (1) Information collection and retrieval procedures for the central
 11 repository, including the controlled substances to be included in
 12 the program required under section 8 of this chapter.

13 (2) Design for the creation of the data base required under section
 14 10 of this chapter.

15 (3) Requirements for the development and installation of online
 16 electronic access by the advisory committee to information
 17 collected by the central repository.

18 (4) Identification of emergency situations or other circumstances
 19 in which a practitioner may prescribe, dispense, and administer a
 20 prescription drug specified in section 8 of this chapter without a
 21 written prescription or on a form other than a form specified in
 22 section ~~8(4)~~ 8(a)(4) of this chapter.

23 (b) This section expires July 1, 2007.

24 SECTION 15. IC 35-48-7-12.1 IS ADDED TO THE INDIANA
 25 CODE AS A NEW SECTION TO READ AS FOLLOWS
 26 [EFFECTIVE JULY 1, 2006]: Sec. 12.1. (a) This section applies after
 27 June 30, 2007.

28 (b) The advisory committee shall adopt rules under IC 4-22-2 to
 29 implement this chapter, including the following:

30 (1) Information collection and retrieval procedures for the
 31 INSPECT program, including the controlled substances to be
 32 included in the program required under section 8.1 of this
 33 chapter.

34 (2) Design for the creation of the data base required under
 35 section 10.1 of this chapter.

36 (3) Requirements for the development and installation of
 37 online electronic access by the advisory committee to
 38 information collected by the INSPECT program.

39 (4) Identification of emergency situations or other
 40 circumstances in which a practitioner may prescribe,
 41 dispense, and administer a prescription drug specified in
 42 section 8.1 of this chapter without a written prescription or on

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a form other than a form specified in section 8.1(b)(4) of this chapter.

(c) The advisory committee may:

(1) Set standards for education courses for individuals authorized to use the INSPECT program.

(2) Identify treatment programs for individuals addicted to controlled substances monitored by the INSPECT program.

(3) Work with impaired practitioner associations to provide intervention and treatment.

SECTION 16. IC 35-48-7-13 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 13. (a) The controlled substances data fund is established to fund the operation of the central repository. The fund shall be administered by the ~~health professions bureau~~ **Indiana professional licensing agency**.

(b) Expenses of administering the fund shall be paid from money in the fund. The fund consists of grants, public and private financial assistance, and sixteen percent (16%) of the controlled substances registration fees imposed under IC 35-48-3-1.

(c) The treasurer of state shall invest the money in the fund not currently needed to meet the obligations of the fund in the same manner as other public money may be invested.

(d) Money in the fund at the end of a state fiscal year does not revert to the state general fund.

(e) This section expires July 1, 2007.

SECTION 17. IC 35-48-7-13.1 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: **Sec. 13.1. (a) This section applies after June 30, 2007.**

(b) The controlled substances data fund is established to fund the operation of the INSPECT program. The fund shall be administered by the Indiana professional licensing agency.

(c) Expenses of administering the fund shall be paid from money in the fund. The fund consists of grants, public and private financial assistance, and sixteen percent (16%) of the controlled substances registration fees imposed under rules adopted under IC 35-48-3-1.

(d) The treasurer of state shall invest the money in the fund not currently needed to meet the obligations of the fund in the same manner as other public money may be invested.

(e) Money in the fund at the end of a state fiscal year does not revert to the state general fund.

SECTION 18. THE FOLLOWING ARE REPEALED [EFFECTIVE

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1 JULY 1, 2007]: IC 35-48-7-2; IC 35-48-7-9.

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COMMITTEE REPORT

Madam President: The Senate Committee on Corrections, Criminal, and Civil Matters, to which was referred Senate Bill No. 342, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 11, line 31, delete "practitioner, the advisory committee, or the INSPECT" and insert "**practitioner is immune from civil liability for an injury, death, or loss to a person solely due to a practitioner seeking or not seeking information from the INSPECT program. The civil immunity described in this subsection does not extend to a practitioner if the practitioner receives information directly from the INSPECT program and then negligently misuses this information. This subsection does not apply to an act or omission that is a result of gross negligence or intentional misconduct.**".

Page 11, delete lines 32 through 39.

and when so amended that said bill do pass.

(Reference is to SB 342 as introduced.)

LONG, Chairperson

Committee Vote: Yeas 8, Nays 0.

 SENATE MOTION

Madam President: I move that Senate Bill 342 be amended to read as follows:

Page 10, between lines 22 and 23, begin a new paragraph and insert: "**(C) upon a finding of probable cause and issuance of a warrant; and**".

(Reference is to SB 342 as printed January 27, 2006.)

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